

COMMISSIONER FOR PATENTS  
Mail Stop Patent Application  
P.O. Box 1450  
Alexandria, VA 22313-1450

PATENT APPLICATION  
Date: February 17, 2004  
File No. 0113.69646

22141 U.S.PTO  
10/780404

A standard linear barcode is positioned vertically on the left side of the page. It consists of a series of vertical black lines of varying widths, with the number '021704' printed in a bold, black, sans-serif font to the right of the barcode.

Sir:

Transmitted herewith for filing is the patent application of  
Inventor(s): Tomotaka Matsuda

For: DEVICES FOR INTERPRETING AND  
RETRIEVING XML DOCUMENTS, METHODS  
OF INTERPRETING AND RETRIEVING XML  
DOCUMENTS, AND COMPUTER PRODUCT

I hereby certify that this paper is being deposited with the United States Postal Service as EXPRESS MAIL in an envelope addressed to: Mail Stop PATENT APPLICATION, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this date.

**February 17, 2004**

Date

*Express Mail Label No.: EV032731602US*

Dail Carron

Enclosed are:

(X) 31 pages of specification, including 10 claims and an abstract.  
(X) an executed oath or declaration, with power of attorney.  
( ) an unexecuted oath or declaration, with power of attorney.  
( )        sheet(s) of informal drawing(s).  
(X) 14 sheet(s) of formal drawings(s).  
(X) Assignment(s) of the invention to FUJITSU LIMITED and Assignment Cover Sheet.  
(X) A check in the amount of \$ 40.00 to cover the fee for recording the assignment(s).  
(X) Information Disclosure Statement, Form PTO-1449 with cited references.  
(X) Claim for Priority and Priority Document.

## Fee Calculation For Claims As Filed

a) Basic Fee						\$ 770.00
b) Independent Claims	<u>6</u>	-	3	=	<u>3</u>	x \$ 86.00 = \$ <u>258.00</u>
c) Total Claims	<u>10</u>	-	20	=	<u>0</u>	x \$ 18.00 = \$ _____
d) Fee for Multiple Dependent Claims						\$ 290.00 = \$ _____
					Total Filing Fee	\$1,028.00

( ) Applicant(s) qualifies as a Small Entity, reducing Filing Fee by half to \$ \_\_\_\_\_

(X) A check in the amount of \$ 1,028.00 to cover the filing fee is enclosed.

( ) Charge \$ \_\_\_\_\_ to Deposit Account No. 07-2069.

( ) Other \_\_\_\_\_.

(X) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069. A duplicate copy of this sheet is enclosed.

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Respectfully submitted,

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